In re	Joseph M Garcia, Jr. Barbara H Garcia	According to the information required to be entered on this statement
	Debtor(s)	(check one box as directed in Part I, III, or VI of this statement):
Case Number: (If known)		☐ The presumption arises.
		■ The presumption does not arise.
		\square The presumption is temporarily inapplicable.

CHAPTER 7 STATEMENT OF CURRENT MONTHLY INCOME AND MEANS-TEST CALCULATION

In addition to Schedules I and J, this statement must be completed by every individual chapter 7 debtor. If none of the exclusions in Part I applies, joint debtors may complete one statement only. If any of the exclusions in Part I applies, joint debtors should complete separate statements if they believe this is required by § 707(b)(2)(C).

	Part I. MILITARY AND NON-CONSUMER DEBTORS
1A	Disabled Veterans. If you are a disabled veteran described in the Declaration in this Part IA, (1) check the box at the beginning of the Declaration, (2) check the box for "The presumption does not arise" at the top of this statement, and (3) complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.
	□ Declaration of Disabled Veteran. By checking this box, I declare under penalty of perjury that I am a disabled veteran (as defined in 38 U.S.C. § 3741(1)) whose indebtedness occurred primarily during a period in which I was on active duty (as defined in 10 U.S.C. § 101(d)(1)) or while I was performing a homeland defense activity (as defined in 32 U.S.C. §901(1)).
1B	Non-consumer Debtors. If your debts are not primarily consumer debts, check the box below and complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.
	☐ Declaration of non-consumer debts. By checking this box, I declare that my debts are not primarily consumer debts.
	Reservists and National Guard Members; active duty or homeland defense activity. Members of a reserve component of the Armed Forces and members of the National Guard who were called to active duty (as defined in 10 U.S.C. § 101(d)(1)) after September 11, 2001, for a period of at least 90 days, or who have performed homeland defense activity (as defined in 32 U.S.C. § 901(1)) for a period of at least 90 days, are excluded from all forms of means testing during the time of active duty or homeland defense activity and for 540 days thereafter (the "exclusion period"). If you qualify for this temporary exclusion, (1) check the appropriate boxes and complete any required information in the Declaration of Reservists and National Guard Members below, (2) check the box for "The presumption is temporarily inapplicable" at the top of this statement, and (3) complete the verification in Part VIII. During your exclusion period you are not required to complete the balance of this form, but you must complete the form no later than 14 days after the date on which your exclusion period ends, unless the time for filing a motion raising the means test presumption expires in your case before your exclusion period ends.
1C	Declaration of Reservists and National Guard Members. By checking this box and making the appropriate entries below, I declare that I am eligible for a temporary exclusion from means testing because, as a member of a reserve component of the Armed Forces or the National Guard
	a. □ I was called to active duty after September 11, 2001, for a period of at least 90 days and □ I remain on active duty /or/ □ I was released from active duty on, which is less than 540 days before this bankruptcy case was filed;
	OR
	b. ☐ I am performing homeland defense activity for a period of at least 90 days /or/☐ I performed homeland defense activity for a period of at least 90 days, terminating on, which is less than 540 days before this bankruptcy case was filed.

		Part II. CALCULATION OF M	ON	NTHLY INCO	ME	FOR § 707(b)(7	7) E	EXCLUSION	ſ	
	Mari	tal/filing status. Check the box that applies a	nd c	complete the balance	e of t	this part of this state	men	t as directed.		
	a. Unmarried. Complete only Column A ("Debtor's Income") for Lines 3-11.									
		Married, not filing jointly, with declaration								
_		My spouse and I are legally separated under								
2	purpose of evading the requirements of § 707(b)(2)(A) of the Bankruptcy Code." Complete o for Lines 3-11.				nly	column A (''Del	btor	's Income'')		
	c. ☐ Married, not filing jointly, without the declaration of separate households set out in Line 2.b ("Debtor's Income") and Column B ("Spouse's Income") for Lines 3-11.				abo	ove. Complete b	oth	Column A		
d. Married, filing jointly. Complete both Column A ("				A ("Debtor's Inco	ome'') and Column B ("	Spo	use's Income")	for :	Lines 3-11.
	All figures must reflect average monthly income received from all sources, derived during the six calendar months prior to filing the bankruptcy case, ending on the last day of the month before the filing. If the amount of monthly income varied during the six months, you must divide the					Column A		Column B		
						Debtor's		Spouse's		
		onth total by six, and enter the result on the a			you	must divide the		Income		Income
3		s wages, salary, tips, bonuses, overtime, cor		<u>-</u>			\$	3,552.21	\$	3,576.82
3					т ·	1 C 1 1	φ	3,332.21	φ	3,370.02
		ne from the operation of a business, profess the difference in the appropriate column(s) or								
		ess, profession or farm, enter aggregate numb								
		nter a number less than zero. Do not include								
4	Line	b as a deduction in Part V.								
		T	ļ.,	Debtor		Spouse				
	a.	Gross receipts	\$	0.00		0.00				
	b. c.	Ordinary and necessary business expenses Business income	\$	btract Line b from 1	•	0.00	\$	0.00	¢	0.00
	_					-	Ф	0.00	Ф	0.00
		s and other real property income. Subtract propriate column(s) of Line 5. Do not enter								
		of the operating expenses entered on Line b				not include any				
5	1	e i i i i i i i i i i i i i i i i i i i		Debtor		Spouse				
	a.	Gross receipts	\$	0.00	\$	0.00				
	b.	Ordinary and necessary operating expenses	\$	0.00	\$	0.00				
	c.	Rent and other real property income	Su	btract Line b from l	Line	a	\$	0.00	\$	0.00
6	Inter	est, dividends, and royalties.					\$	0.00	\$	0.00
7	Pensi	on and retirement income.					\$	0.00	\$	0.00
		amounts paid by another person or entity, o								
8		nses of the debtor or the debtor's dependent								
0		ose. Do not include alimony or separate main e if Column B is completed. Each regular pa								
		ayment is listed in Column A, do not report the				only one column,	\$	0.00	\$	0.00
	1	ployment compensation. Enter the amount				of Line 9.				
	Howe	ever, if you contend that unemployment comp	ensa	ation received by yo	ou or	your spouse was a				
9		it under the Social Security Act, do not list th		nount of such comp	ensa	tion in Column A				
	or B,	but instead state the amount in the space belo	w:			1				
		mployment compensation claimed to	¢	0.00 5		¢ 0.00				
	be a	benefit under the Social Security Act Debto	ıÞ	0.00 Spo	ouse	\$ 0.00	\$	0.00	\$	0.00
		ne from all other sources. Specify source and								
		eparate page. Do not include alimony or seperate if Column B is completed, but include all								
		tenance. Do not include any benefits received								
		yed as a victim of a war crime, crime against h								
10		stic terrorism.		•						
				Debtor		Spouse				
	a.		\$		\$					
	b.		\$		\$					
		and enter on Line 10					\$	0.00	\$	0.00
11		otal of Current Monthly Income for § 707(l					d.	2 FEO 04	¢.	2 F76 00
	Colur	nn B is completed, add Lines 3 through 10 in	Col	umn B. Enter the	total(S).	\$	3,552.21	\$	3,576.82

12	Total Current Monthly Income for § 707(b)(7). If Column B has been completed, add Line 11, Column A to Line 11, Column B, and enter the total. If Column B has not been completed, enter the amount from Line 11, Column A.		7,129.03				
	Part III. APPLICATION OF § 707(b)(7) EXCLUSION						
13	Annualized Current Monthly Income for § 707(b)(7). Multiply the amount from Line 12 by the number 12 and enter the result.	\$	85,548.36				
14	Applicable median family income. Enter the median family income for the applicable state and household size. (This information is available by family size at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)						
	a. Enter debtor's state of residence: WA b. Enter debtor's household size: 5	\$	90,442.00				
15	Application of Section 707(b)(7). Check the applicable box and proceed as directed. ■ The amount on Line 13 is less than or equal to the amount on Line 14. Check the box for "The presumption	does no	ot arise" at the				
13	top of page 1 of this statement, and complete Part VIII; do not complete Parts IV, V, VI or VII.						
	☐ The amount on Line 13 is more than the amount on Line 14. Complete the remaining parts of this statement.						

Complete Parts IV, V, VI, and VII of this statement only if required. (See Line 15.)

	Complete 1 at ts 1v, v, vi	, and vii of this	statement omy ii required	. (See Line 13.)	
	Part IV. CALCULATION (F CURREN	T MONTHLY INCO	ME FOR § 707(b)(2)
16	Enter the amount from Line 12.				\$
17	Marital adjustment. If you checked the box a Column B that was NOT paid on a regular bas dependents. Specify in the lines below the bas spouse's tax liability or the spouse's support of amount of income devoted to each purpose. If not check box at Line 2.c, enter zero. a.	is for the househ is for excluding t persons other th	old expenses of the debtor of the Column B income (such an the debtor or the debtor's ditional adjustments on a se	r the debtor's as payment of the dependents) and the	
	b. c.		\$ \$		
	d.		\$		
	Total and enter on Line 17				\$
18	Current monthly income for § 707(b)(2). Su	btract Line 17 fr	om Line 16 and enter the res	sult.	\$
	Part V. CALCUL	ATION OF D	EDUCTIONS FROM	INCOME	
	Subpart A: Deductions u	ınder Standar	ls of the Internal Reven	ue Service (IRS)	
19A	National Standards: food, clothing and other items. Enter in Line 19A the "Total" amount from IRS National Standards for Food, Clothing and Other Items for the applicable number of persons. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) The applicable number of persons is the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support.				
19B	National Standards: health care. Enter in Line al below the amount from IRS National Standards for Out-of-Pocket Health Care for persons under 65 years of age, and in Line a2 the IRS National Standards for Out-of-Pocket Health Care for persons 65 years of age or older. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) Enter in Line b1 the applicable number of persons who are under 65 years of age, and enter in Line b2 the applicable number of persons who are 65 years of age or older. (The applicable number of persons in each age category is the number in that category that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support.) Multiply Line a1 by Line b1 to obtain a total amount for persons under 65, and enter the result in Line c1. Multiply Line a2 by Line b2 to obtain a total amount for persons 65 and older, and enter the result in Line c2. Add Lines c1 and c2 to obtain a total health care amount, and enter the result in Line 19B.				
	Persons under 65 years of age		Persons 65 years of ago	e or older	
	a1. Allowance per person b1. Number of persons	a2. b2.	Allowance per person Number of persons		
	c1. Subtotal	c2.	Subtotal		\$
20A	Local Standards: housing and utilities; non-mortgage expenses. Enter the amount of the IRS Housing and Utilities Standards; non-mortgage expenses for the applicable county and family size. (This information is				\$

20B	Local Standards: housing and utilities; mortgage/rent expense. En Housing and Utilities Standards; mortgage/rent expense for your cour available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy of the number that would currently be allowed as exemptions on your feany additional dependents whom you support); enter on Line be the tot debts secured by your home, as stated in Line 42; subtract Line be from not enter an amount less than zero. a. IRS Housing and Utilities Standards; mortgage/rental expense.	aty and family size (this information is ourt) (the applicable family size consists of deral income tax return, plus the number of all of the Average Monthly Payments for any			
	b. Average Monthly Payment for any debts secured by your home, if any, as stated in Line 42 c. Net mortgage/rental expense	\$ Subtract Line b from Line a.	\$		
21	Local Standards: housing and utilities; adjustment. If you contend 20B does not accurately compute the allowance to which you are enti Standards, enter any additional amount to which you contend you are contention in the space below:	I that the process set out in Lines 20A and tled under the IRS Housing and Utilities	\$		
22A	Local Standards: transportation; vehicle operation/public transportation expense. You are entitled to an expense allowance in this category regardless of whether you pay the expenses of operating a vehicle and regardless of whether you use public transportation. Check the number of vehicles for which you pay the operating expenses or for which the operating expenses are included as a contribution to your household expenses in Line 8.				
22B	Local Standards: transportation; additional public transportation expense. If you pay the operating expenses for a vehicle and also use public transportation, and you contend that you are entitled to an additional deduction for you public transportation expenses, enter on Line 22B the "Public Transportation" amount from IRS Local Standards: Transportation. (This amount is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)				
23	Local Standards: transportation ownership/lease expense; Vehicle 1. Check the number of vehicles for which you claim an ownership/lease expense. (You may not claim an ownership/lease expense for more than two vehicles.) 1 2 or more. Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 1, as stated in Line 42; subtract Line b from Line a and enter the result in Line 23. Do not enter an amount less than zero. a. IRS Transportation Standards, Ownership Costs Average Monthly Payment for any debts secured by Vehicle b. 1, as stated in Line 42				
24	c. Net ownership/lease expense for Vehicle 1 Subtract Line b from Line a. Local Standards: transportation ownership/lease expense; Vehicle 2. Complete this Line only if you checked the "2 or more" Box in Line 23. Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 42; subtract Line b from Line a and enter the result in Line 24. Do not enter an amount less than zero. a. IRS Transportation Standards, Ownership Costs Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 42				
25	c. Net ownership/lease expense for Vehicle 2 Subtract Line b from Line a. Other Necessary Expenses: taxes. Enter the total average monthly expense that you actually incur for all federal, state and local taxes, other than real estate and sales taxes, such as income taxes, self employment taxes, social				
	security taxes, and Medicare taxes. Do not include real estate or sale		\$		

26	Other Necessary Expenses: involuntary deductions for employment. Enter the total average monthly payroll deductions that are required for your employment, such as retirement contributions, union dues, and uniform costs. Do not include discretionary amounts, such as voluntary 401(k) contributions.			
27	Other Necessary Expenses: life insurance. Enter total ave life insurance for yourself. Do not include premiums for in any other form of insurance.	rage monthly premiums that you actually pay for term	\$	
28	Other Necessary Expenses: court-ordered payments. Ent pay pursuant to the order of a court or administrative agency include payments on past due obligations included in Line	, such as spousal or child support payments. Do not	\$	
29	Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total average monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available.			
30	Other Necessary Expenses: childcare. Enter the total aver childcare - such as baby-sitting, day care, nursery and presch		\$	
31	Other Necessary Expenses: health care. Enter the total av health care that is required for the health and welfare of your insurance or paid by a health savings account, and that is in include payments for health insurance or health savings a	rself or your dependents, that is not reimbursed by excess of the amount entered in Line 19B. Do not	\$	
32	Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you actually pay for telecommunication services other than your basic home telephone and cell phone service - such as pagers, call waiting, caller id, special long distance, or internet service - to the extent necessary for your health and welfare or that of your dependents. Do not include any amount previously deducted.			
33	Total Expenses Allowed under IRS Standards. Enter the	total of Lines 19 through 32.	\$	
	Note: Do not include any expensions Health Insurance, Disability Insurance, and Health Savin			
34	the categories set out in lines a-c below that are reasonably redependents.			
	a. Health Insurance \$			
	b. Disability Insurance \$		Φ.	
	c. Health Savings Account \$		\$	
	Total and enter on Line 34. If you do not actually expend this total amount, state your below: \$			
35	Continued contributions to the care of household or famile expenses that you will continue to pay for the reasonable and ill, or disabled member of your household or member of you expenses.	d necessary care and support of an elderly, chronically	\$	
36	Protection against family violence. Enter the total average reasonably necessary monthly expenses that you actually incurred to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law. The nature of these expenses is required to be kept confidential by the court.			
37	Home energy costs. Enter the total average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities, that you actually expend for home energy costs. You must provide your case trustee with documentation of your actual expenses, and you must demonstrate that the additional amount claimed is reasonable and necessary.			
38	Education expenses for dependent children less than 18. actually incur, not to exceed \$147.92* per child, for attendan school by your dependent children less than 18 years of age. documentation of your actual expenses, and you must expenses and not already accounted for in the IRS Standards.	You must provide your case trustee with blain why the amount claimed is reasonable and	\$	

 $^{^{*}}$ Amount subject to adjustment on 4/01/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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39	exper Stand or fro	Additional food and clothing expense. Enter the total average monthly amount by which your food and clothing expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National Standards, not to exceed 5% of those combined allowances. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) You must demonstrate that the additional amount claimed is reasonable and necessary.					
40			Enter the amount that you will conting panization as defined in 26 U.S.C. § 1		he form of cash or	\$	
41	Total	Additional Expense Deductions	s under § 707(b). Enter the total of L	ines 34 through 40		\$	
		Sı	ubpart C: Deductions for De	bt Payment			
42	Future payments on secured claims. For each of your debts that is secured by an interest in property that you own, list the name of the creditor, identify the property securing the debt, and state the Average Monthly Payment, and check whether the payment includes taxes or insurance. The Average Monthly Payment is the total of all amounts scheduled as contractually due to each Secured Creditor in the 60 months following the filing of the bankruptcy case, divided by 60. If necessary, list additional entries on a separate page. Enter the total of the Average Monthly Payments on Line 42.						
		Name of Creditor	Property Securing the Debt		Does payment include taxes or insurance?		
	a.			\$	□yes □no		
				Total: Add Line		\$	
43	Other payments on secured claims. If any of debts listed in Line 42 are secured by your primary residence, a motor vehicle, or other property necessary for your support or the support of your dependents, you may include in your deduction 1/60th of any amount (the "cure amount") that you must pay the creditor in addition to the payments listed in Line 42, in order to maintain possession of the property. The cure amount would include any sums in default that must be paid in order to avoid repossession or foreclosure. List and total any such amounts in the following chart. If necessary, list additional entries on a separate page. Name of Creditor						
44	Payments on prepetition priority claims. Enter the total amount, divided by 60, of all priority claims, such as priority tax, child support and alimony claims, for which you were liable at the time of your bankruptcy filing. Do not include current obligations, such as those set out in Line 28.					\$	
			If you are eligible to file a case under the amount in line b, and enter the res				
45	a. Projected average monthly Chapter 13 plan payment. b. Current multiplier for your district as determined under schedules issued by the Executive Office for United States Trustees. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) c. Average monthly administrative expense of Chapter 13 case Total: Multiply Lines a and b				\$		
46	Total Deductions for Debt Payment. Enter the total of Lines 42 through 45.			\$			
	Subpart D: Total Deductions from Income						
47	Total of all deductions allowed under § 707(b)(2). Enter the total of Lines 33, 41, and 46.					\$	
Part VI. DETERMINATION OF § 707(b)(2) PRESUMPTION							
48	Enter the amount from Line 18 (Current monthly income for § 707(b)(2))					\$	
49	Ente	r the amount from Line 47 (Tota	al of all deductions allowed under §	707(b)(2))		\$	
50	Mon	thly disposable income under § 7	707(b)(2). Subtract Line 49 from Line	48 and enter the re	sult.	\$	
51	60-m	=	707(b)(2). Multiply the amount in Li	ne 50 by the numbe	r 60 and enter the	\$	

(
52	Initial presumption determination. Check the applicable box and proceed as directed. ☐ The amount on Line 51 is less than \$7,025*. Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete the verification in Part VIII. Do not complete the remainder of Part VI.					
	☐ The amount set forth on Line 51 is more than \$11,725* Check the box for "The presumption arises" at the top of page 1 of this statement, and complete the verification in Part VIII. You may also complete Part VII. Do not complete the remainder of Part VI. ☐ The amount on Line 51 is at least \$7,025*, but not more than \$11,725*. Complete the remainder of Part VI (Lines 53 through 55).					
	1 The amount on Line 51 is at least \$7,025", but not mor	e than \$11,725". Complete the remainder of Part VI	(Lines 53 through 55).			
53	Enter the amount of your total non-priority unsecured de	bt	\$			
54	Threshold debt payment amount. Multiply the amount in L	ine 53 by the number 0.25 and enter the result.	\$			
	Secondary presumption determination. Check the applicab	ole box and proceed as directed.				
55	☐ The amount on Line 51 is less than the amount on Line of this statement, and complete the verification in Part VIII.	54. Check the box for "The presumption does not a	rise" at the top of page 1			
	☐ The amount on Line 51 is equal to or greater than the amount on Line 54. Check the box for "The presumption arises" at the top of page 1 of this statement, and complete the verification in Part VIII. You may also complete Part VII.					
	Part VII. ADDITION	NAL EXPENSE CLAIMS				
56	Other Expenses. List and describe any monthly expenses, no you and your family and that you contend should be an addit 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a each item. Total the expenses.	ional deduction from your current monthly income u	nder §			
	Expense Description	Monthly Am	ount			
	a.	\$				
	b.	\$				
	c.	\$				
	d.	\$				
	Total: Add Lin	es a, b, c, and d \$				
	Part VIII. V	/ERIFICATION				
	I declare under penalty of perjury that the information provide must sign.) Date: September 5, 2012	Signature: /s/ Joseph M Garcia, Jr. Joseph M Garcia, Jr.				
57		(Debtor)				
	Date: September 5, 2012	Signature /s/ Barbara H Garcia Barbara H Garcia				

(Joint Debtor, if any)

^{*} Amounts are subject to adjustment on 4/01/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 03/01/2012 to 08/31/2012.

Line 3 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: All Star Lanes

Year-to-Date Income:

Starting Year-to-Date Income: \$6,229.63 from check dated 2/29/2012. Ending Year-to-Date Income: \$27,542.90 from check dated 8/31/2012.

Income for six-month period (Ending-Starting): \$21,313.27.

Average Monthly Income: **\$3,552.21**.

Current Monthly Income Details for the Debtor's Spouse

Spouse Income Details:

Income for the Period **03/01/2012** to **08/31/2012**.

Line 3 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Kitsap County

Year-to-Date Income:

Starting Year-to-Date Income: **\$5,913.07** from check dated **2/29/2012**. Ending Year-to-Date Income: **\$27,374.00** from check dated **8/31/2012**.

Income for six-month period (Ending-Starting): \$21,460.93.

Average Monthly Income: \$3,576.82.